

STAFF LOG

The Safehaven Project for Community Living is committed to safety. We ask all visitors to sign in and sign out. Thank you.

Name (Please Print)	Date of Visit	Temperature	Were you screened for infectious symptoms upon entry? <small>Your screening should include Hand Hygiene Education.</small>	Time In	Time Out	Are you performing work at Safehaven? <small>If you answer "yes" you must comply with the law, the health and safety policies of your employer <u>and</u> Safehaven (see attached).</small>	Initials of staff who screened you
			<input type="checkbox"/> YES <input type="checkbox"/> NO			<input type="checkbox"/> YES <input type="checkbox"/> NO	
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